# MDR Tracking Number: M4-03-7065-01

Under the provisions of Section 413.031 of the Texas Workers' Compensation Act, Title 5, Subtitle A of the Texas Labor Code, effective June 17, 2001 and Commission Rule 133.305, titled Medical Dispute Resolution-General, and 133.307, titled Medical Dispute Resolution of a Medical Fee Dispute, a review was conducted by the Division regarding a medical fee dispute between the requestor and the respondent named above. This dispute was received on 5-19-03.

## I. DISPUTE

Whether there should be reimbursement for CPT codes: 22830-79, 22852-79 and 63709-79.

## II. FINDINGS

The respondent denied reimbursement based upon "G – This procedure is included in another procedure performed on this date."

#### III. RATIONALE

DOS	CPT	Billed	Paid	EOB	MAR\$	Reference	Rationale
	CODE			Denial	(Maximum		
				Code	Allowable		
					Reimbursement)		
9-17-02	22830-79	\$3500.00	\$0.00	G	\$3338.00 X 50%	Exploration of	Operative report supports service
					= \$1669.00	spinal fusion	rendered. Per '94 GSDOS this is
						Surgery GR	not global, reimbursement of
						(I)(D)(1)(b)	\$1669.00 is recommended.
9-17-02	22852-79	\$1300.00	\$0.00	G	\$1264.00 X 50%	Removal of	Operative report supports service
					= \$632.00	posterior	rendered. Per '94 GSDOS this is
						segmental	not global, reimbursement of
						instrumentation	\$632.00 is recommended.
						Surgery GR	
						(I)(D)(1)(b)	
9-17-02	63709-79	\$3500.00	\$3000.00	No	\$3237.00	Repair of	Additional reimbursement of
				Code		dural/CSF leak	\$237.00 is recommended.
TOTAL				•	_		The requestor is entitled to
							reimbursement of \$2538.00

# IV. DECISION & ORDER

Based upon the review of the disputed healthcare services within this request, the Division has determined that the requestor **is** entitled to reimbursement for CPT codes, 22830-79, 22852-79 and 63709-79, in the amount of **\$2538.00**. Pursuant to Sections 402.042, 413.016, 413.031, and 413.019 the Division hereby ORDERS the Respondent to remit **\$2538.00** plus all accrued interest due at the time of payment to the Requestor within 20 days receipt of this Order.

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The above Findings, Decision and Order are hereby issued this 14th day of January 2005.

Elizabeth Pickle Medical Dispute Resolution Officer Medical Review Division